## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHDE030349 US

As a below named inventor, I h	ereby declare that:		-			
My residence, post office addre	ess and citizenship are as state	ed next to my name.				
	of the subject matter which is e-scatter computed tomogr	name is listed below) or an original, to claimed and for which a patent is so caphy				
is attached hereto.						
was filed as United States a	pplication					
Serial No	·					
on						
and was amended						
on			·			
on <u>October 5, 2004</u>						
and was amended under PCT Article 19 on(if applicable).						
· · ·			().			
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.						
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).						
or inventor's certificate or of any States of America listed below a any PCT international application	y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign and (s) designating at least one country foreign application(s) for patent or incountry other than the United States the application(s) of which priority is	other than the United nventor's certificate or s of America filed by me			
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119	:			
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119			
Europe	03103789.8	14 October 2003	YES			
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U.S. DEPARTMENT OF COMMERCE –Patent and Trademarks Office (July 1994)

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number (includes Reference to PCT International Applications) PHDE030349 US POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Direct Telephone Calls to: Jack E. Haken, Reg. No. 26,902 (name and telephone number) Michael E. Marion, Reg. No. 32,266 (914)332-0222 Edward M. Blocker, Reg. No. 30,245 FULL NAME OF FIRST GIVEN NAME **FAMILY NAME** SECOND GIVEN NAME INVENTOR **VAN STEVENDAAL** Udo RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 201 CITIZENSHIP Germany Germany **Ahrensburg** POST OFFICE ADDRESS POST OFFICE STATE & ZIP CODE/COUNTRY **ADDRESS** Hagener Allee 70k 22926 Ahrensburg Germany FULL NAME OF **FAMILY NAME** FIRST GIVEN NAME SECOND GIVEN NAME **INVENTOR SCHLOMKA** Jens-Peter RESIDENCE & STATE OR FOREIGN COUNTRY 202 CITY **COUNTRY OF CITIZENSHIP** CITIZENSHIP Hamburg Germany Germany POST OFFICE ADDRESS POST OFFICE STATE & ZIP CODE/COUNTRY CITY **ADDRESS** 22303 Hamburg Geibelstr. 42 Germany

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

12.10.04, Vido van Strandaal Jus-let Ule DATE DATE

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

PTO/SB/80 (11-04)

Approved for use through 11/60/2005. OMB 0651-0035

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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).						
I hereby appoint:						
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OR Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):						
	, ,			riameu, men a cu		ist be used):
		Name	Registration Number		Name	Registration Number
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as attor	nevie) or agentic	to margaant the understand but	麗			
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).						
Please	change the corre	spondence address for the applicat	tion identified in the att	ached statement (	under 37 CFR 3.73	(b) to:
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Assigne	e Name and Add	roce.				
Assignee Name and Address:  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands						
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.						
SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee						
Signatur		May 5. Hh	un		Date 14 Ja:	nuary 2005
Name	Michael E. Marion Telephone (914) 333-96				4) 333-9637	
Title	Title Authorized Representative					

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## 10/575586 IAP15 Rec'd PCT/PTO 11 APR 2006

PTO/SB/96 (08-03)

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STATEMEN	T UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Koninklijke Philips Electronics N.V.	
Application No./Patent No.: Concurrently Fi	led/Issue Date: Concurrently
Entitled: FAN-BEAM COHERENT-SCATTER COMPUTED	TOMOGRAPHY
Koninklijke Philips Electronics N.V. , a (Name of Assignee)	corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is:  1.	
2.   an assignee of less than the entire right, title and in the extent (by percentage) of its ownership interest in the patent application/patent identified above by virtue.	st is ———— %
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The undersigned (whose title is supplied below) is author	rized to act on behalf of the assignee.
4 /3/06	Frank Keegan, Reg. 50,145
Date (914) 333-9669	Typed or printed name
Telephone number	Signature
	Corporate Counsel Title

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